



PANDEMIC INFLUENZA U • P • D • A • T • E



CDC Prepares

Special Issue

August 2006

Fast Facts

CDC's Influenza Pandemic Operation Plan

- The final draft of CDC's Influenza Pandemic Operation Plan has been completed and includes more than 1600 specific activities for CDC that cross all coordinating centers and all job functions
- This plan is part of the National Strategy for Pandemic Influenza and provides a framework for preparedness planning and emergency response
- Agencies participating in the national plan include the Departments of Homeland Security, Health and Human Services, Agriculture, Commerce, Defense, Interior, Labor, State, Transportation, Education, and Treasury, as well as state, local, territorial, and tribal governments and the World Health Organization

If You Are Asked . . .

“What is CDC’s role in pandemic preparedness?”

Influenza Coordination Unit

In May 2006, the Homeland Security Council (HSC) expanded on the *National Strategy* by releasing the *Implementation Plan for the National Strategy for Pandemic Influenza*. This plan includes 300 specific tasks for CDC.

In light of the enormity of the pandemic preparedness undertaking, Dr. Julie Gerberding asked James LeDuc, PhD, director, [Division of Viral and Rickettsial Diseases](#), to form a team to oversee pandemic planning and preparedness activities across CDC. This was essential said Dr. Gerberding, because CDC is a fundamental participant in this area. So CDC must ensure that its activities are coordinated with those of others, both internally and externally.

The new team, called the Influenza Coordination Unit (ICU; based in CCID), is responsible for pandemic influenza communications, project support, and budget and policy issues. In each of these areas, LeDuc states “the ICU will work to ensure that our efforts and responsibilities are well coordinated, on schedule, and consistent with the efforts of other agencies.”

The ICU, along with CCID, COTPER leadership and subject matter experts from across the agency, was also responsible for developing an operations plan to enable CDC to plan for and respond to a pandemic influenza event and, with the help of an outside contractor, have completed the final draft of the *CDC Influenza Pandemic Operations Plan*, or OPLAN, which identifies 1643 tasks, including the 300 from the HSC plan.



Dr. LeDuc speaks about pandemic preparedness

More than 100 of these tasks are considered “critical,” meaning they need to be completed in order for CDC to succeed in responding to an influenza pandemic. All tasks must be completed according to a prioritized timeline, and all require multiple steps for completion as well as coordinated input from various groups within CDC, and from various agencies outside CDC.

Task Force Leadership Group (TF)	
Lead	Jim LeDuc, Coordinating Center for Infectious Disease (CCID)
Informatics	Kristin Uhde, Coordinating Center for Health Information and Service (CCHIS)
Quarantine	Tony Marfin, CCID
International Activities	David Bull, Coordinating Office for Global Health
Domestic Activities	Nicole Smith, CCID
Healthcare Preparedness and Delivery	Deborah Levy, CCID Sherline Lee, CCID
Communications	Teresa Nastoff, CCHIS; John O’Connor, CCID
Operations	Al Hogan, Coordinating Office for Terrorism Preparedness and Emergency Response (COTPER)
Planning	Dru Phillippe, COTPER
Strategic National Stockpile	Anita Patel, Chris Duggar, John Fredenberg, COTPER
Vaccines	Tom Shimabukuro, CCID
Antivirals	David Shay, CCID
Occupational Health	Max Keifer, Ken Martinez, National Institute for Occupational Safety and Health
Plan Coordination	Alexandra Levitt, CCID
State and Local Preparedness	Dorotha L. Hall, COTPER

Partnerships	Lisa Koonin, CCHIS
ITSO	Lew Newlin (backup, Vicki Kipreos), Office of the Director (OD)
Portfolio Management Project	Glenn Koops, OD

To meet this project head on, LeDuc recently formed a pandemic influenza Task Force Executive Steering Committee (EC) and a Task Force Leadership Group (TF).

The EC will work closely with the LeDuc and the ICU to ensure that technical programs are fully engaged in all pandemic preparedness activities, that the appropriate subject matter experts are involved, and that external partners are informed and are active participants in program development and implementation. The EC will also collaborate with ICU to facilitate further identification of tasks, tracking of progress toward completion of each task, and reporting to HHS, Department of Homeland Security (DHS), and others, as appropriate. It will collaborate with ICU on strategic issues (e.g., technical assistance needs of states and capacity to deliver, overall capacity issues).

The TF, which held its inaugural meeting August 2, 2006, will be in effect for up to one year. The initial effort of the TF will be to conduct an analysis of specific tasks assigned to CDC by HSC or HHS and of the 1643 tasks identified during the development of the CDC's pandemic influenza OPLAN. The product of this analysis will ensure that tasks are appropriately defined, measurable, and non-duplicative; that primary and supporting responsibilities are assigned appropriately; and that subtasks necessary to accomplish the task are identified. The TF will also provide technical assistance in developing and conducting exercises and assisting with training activities related both to exercises and the OPLAN.

CDC is involved in a myriad other activities through the Influenza Division, as another part of pandemic preparedness. These pandemic prevention and preparedness activities include the following:

- Providing leadership to the National Pandemic Influenza Preparedness and Response Task Force, created in May 2005 by the Secretary of Health and Human Services.
- Working with the Association of Public Health Laboratories on training workshops for state laboratories on the use of special laboratory (molecular) techniques to identify H5 influenza viruses.
- Working with the Council of State and Territorial Epidemiologists and others to help states with their pandemic planning efforts.
- Working with other agencies, such as the Department of Defense and the Veterans Administration, on antiviral stockpile issues.
- Working with the World Health Organization (WHO) to investigate influenza H5N1 among people (e.g., in Vietnam) and to provide help in laboratory diagnostics and training to local authorities.

- Performing laboratory testing of H5N1 viruses.
- Starting a \$5.5 million initiative to improve influenza surveillance in Asia.
- Holding or taking part in training sessions to improve local capacities to conduct surveillance for possible human cases of H5N1 and to detect influenza A H5 viruses by using laboratory techniques.
- Developing and distributing reagent kits to detect the currently circulating influenza A H5N1 viruses.
- CDC has developed and is distributing the first FDA approved test for the detection of the H5 viruses that first emerged in Asia in 2003.

CDC also is working closely with WHO and the National Institutes of Health on safety testing of vaccine candidates and development of additional vaccine virus seed candidates for influenza A (H5N1) and other subtypes of influenza A viruses.

More information on these activities will be coming soon in a second special issue of *Pandemic Influenza Update*.

CDC Prepares . . .

CDC has formed a Countermeasures Working Group, which comprises representatives from Office of Health and Safety (OHS), Office of Enterprise Communication, the National Center for Health Marketing, and the Office of Workforce and Career Development. This an agency-wide pandemic influenza team is working hard to ensure that CDC's internal and external response to an influenza pandemic is integrated, coordinated, and effective.



Casey Chosewood and Angie Fugo work on plans for CDC's annual influenza campaign.

“The Office of Health and Safety is working to ensure a posture of readiness year round,” says Casey Chosewood, Director of OHS. “But as a participant on the Countermeasures Workgroup there are specific goals that we are working to achieve across and collaboratively within the agency,” continued Chosewood.

The workgroup's intent is to develop plans to ensure the following:

- Workers are protected during an emergency event that threatens the continuity of operations at CDC
- Continuity of operations to meet the nation's public health needs
- Workers are prepared at work and at home to know what to do in an emergency
- Preparations are in place if countermeasures are needed in the home or must be provided to family members of staff to help ensure continuity of operations
- Plans are in place to reduce the amount of absenteeism during a pandemic or other public health crises in the local population

The group is drafting specific messages in print and other formats for the CDC workforce to be used in the workplace and at home and in our communities in the event of a pandemic. Messages include guidance on hand hygiene, cough etiquette, general family emergency preparedness, caring for self and others during pandemic. It includes a section called *When should I Stay Home from Work*, as well as messaging on keeping yourself healthy all the time, including nutritious eating, exercise, stress and grief management, getting adequate rest and sleep, staying connected to one's social and support networks, and accessing professional mental health resources. The publications should be available in the coming months.

The Office of Health and Safety is also working with Office of Personnel Management on guidelines for teleworking and sick leave in the event of a pandemic. OHS intends to use the annual fall influenza vaccine campaign as a way to provide those who come to be vaccinated with information about pandemic flu and protection measures. Plans are also underway to set up a mechanism for sharing information with staff on a continuous basis as well as a forum that allows staff to ask questions.

Updates on the work of this group will be ongoing.

Pandemic Influenza Update:

Reader's Feedback

The monthly Pandemic Influenza Update is prepared by CDC's Office of Enterprise Communications. Information in this newsletter is time sensitive and evolving. Readers are welcome to comment by email to

PANUPDATE@CDC.GOV